



# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: SHELTON, James et al.  
 Atty. Docket No.: 2540-0657  
 Confirmation No.: 1916  
 Appln. No.: 10/632,098  
 Group Art Unit: 2157  
 Filed: August 1, 2003  
 Examiner: SALL, El Hadji Malick  
 Title: METHOD AND APPARATUS FOR A SECURE MANAGEMENT PROTOCOL  
 Date: June 24, 2008

## REPLY/AMENDMENT/LETTER TRANSMITTAL COVER SHEET

Hon. Commissioner of Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

This is a reply/amendment/letter in the above-identified application and includes the attachments hereto. The signature below is treated as the signature to the attachments in the absence of a signature thereto.

### FEE REQUIREMENTS

|   | <i>Claims remaining<br/>after amendment</i> |       | <i>Highest number<br/>previously Paid For</i> |    | <i>Present<br/>Extra</i>  | <i>Rate:<br/>Large/Small<br/>Entity</i>  |        |
|---|---|-------|---|----|---|--|--------|
| 1. <i>Total</i>   | 16  | minus | 20  | *  | = 0   | X \$50 / \$ 25 =   | \$     |
| * If this number is less than 20, enter "20"  |   |       |   |    |   |  |        |
| 2. <i>Independent<br/>Claims</i>  | 1   | minus | 3   | ** | = 0   | X \$210 / \$105 =  | \$     |
| ** If this number is less than 3, enter "3"   |   |       |   |    |   |  |        |
| 3. If amendment enters multiple dependent claim(s) into this application for first time (leave this line <u>blank</u> if this is an <u>reissue</u> application) |   |       |   |    |   | \$370 / \$185 =  | \$     |
| 4. <b>Original due date:</b> March 28, 2008   |   |       |   |    |   |  |        |
|   |   |       |   |    | Check time period and enter appropriate fee   |  |        |
| 5. <b>Petition is hereby made</b> to extend the <u>original</u> due date to cover the date this response is filed for which the requisite fee is:               |   |       |   |    | <input type="checkbox"/> 1 month<br><input type="checkbox"/> 2 months.<br><input checked="" type="checkbox"/> 3 months<br><input type="checkbox"/> 4 months<br><input type="checkbox"/> 5 months. | \$120 / \$60<br>\$460 / \$230<br>\$1050 / \$525<br>\$ 1640/ \$820<br>\$2230 / \$1115 | \$1050 |
| 6. <input type="checkbox"/> Attached is a Petition/Fee under Rule No.   |   |       |   |    |   | \$   | \$     |
| 7. Other Fee for  |   |       |   |    |   |  | \$     |
| 8. <b>Total Fee Enclosed:</b>   |   |       |   |    |   |  | \$1050 |

*This is a 2 page form,  
continued on next page . . .*

*In re Patent Application of:*

TRANSMITTAL COVER SHEET, PAGE 2

SHELTON, James et al.

Attorney Docket No.

2540-0657

Appln. No.: 10/632,098

Confirmation Number:

1916

9. ☒ Please charge the total fee on line 8 above to our deposit account below under the stated order number.

**CHARGE STATEMENT:** Deposit Account No. 501860, order no. (client-matter no.) **2540-0657**.

The Commissioner is hereby authorized to charge any fee specifically authorized hereafter, or any missing or insufficient fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under Rules 16-18 (missing or insufficiencies only) now or hereafter relative to this application and the resulting Official Document under Rule 20, or credit any overpayment, to our Accounting/ Order Nos. shown above, for which purpose a duplicate copy of this sheet is attached.

**This CHARGE STATEMENT does not authorize charge of the issue fee until/unless an issue fee transmittal sheet is filed.**

CUSTOMER NUMBER

**42624**

Respectfully submitted,

By:



J. Scott Davidson

Registration No.: 33,489

Davidson Berquist Jackson & Gowdey LLP  
4300 Wilson Blvd., 7th Floor, Arlington, Virginia 22203  
Main: (703) 894-6400 • FAX: (703) 894-6430